



*DPW*

Please type a plus sign (+) inside this box → +

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|  |    |                        |                 |
|--|----|------------------------|-----------------|
| <b>TRANSMITTAL<br/>FORM</b><br><i>(to be used for all correspondence after initial filing)</i> |    | Application Number     | 10/735,016      |
|  |    | Filing Date            | 12/12/2003      |
|  |    | First Named Inventor   | Koshinz, Dennis |
|  |    | Group Art Unit         | 2883            |
|  |    | Examiner Name          | Kianni          |
| Total Number of Pages in This Submission   | 4* | Attorney Docket Number | 81006/7400      |

## ENCLOSURES (check all that apply)

|   |   |  |
|---|---|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><br><input checked="" type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Return Receipt Postcard to Applicant's Attorney/Agent |
| Remarks   |   | *Exclusive of copies of reference  |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                         |   |  |
|-------------------------|---|--|
| Firm or Individual name | FITCH, EVEN, TABIN & FLANNERY , by Julie A. Hopper (Reg. No. 50869) |  |
| Signature               |   |  |
| Date                    | April 15, 2005  |  |

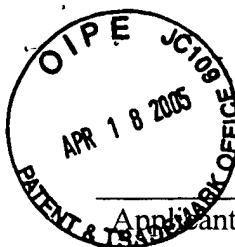
## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Post Office Box 1450, Alexandria, VA 22313-1450 on this date:

April 15, 2005

|                      |                 |      |                |
|----------------------|-----------------|------|----------------|
| Type or printed name | Julie A. Hopper |      |                |
| Signature            |                 | Date | April 15, 2005 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Koshinz, Dennis

Appl. No.: 10/735,016

Filed: 12/12/2003

Title: METHOD AND APPARATUS FOR  
ANGLED FIBER OPTICAL  
ATTENUATION

Attorney Docket No.: 81006/7400

Group Art Unit: 2883

Examiner: Kianni

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**INFORMATION DISCLOSURE STATEMENT**

Dear Sir:

This Information Disclosure Statement is submitted:

- under 37 CFR 1.97(b), or  
(Within three months of filing national application; or date of entry of international application; or before mailing date of first office action on the merits; whichever occurs last)
- under 37 CFR 1.97(c) together with either a:
  - Statement under 37 CFR 1.97(e), or
  - a \$180.00 fee under 37 CFR 1.17(p), or  
(After the CFR 1.97(b) time period, but before final action or notice of allowance, whichever occurs first)
- under 37 CFR 1.97(d) together with a:
  - Statement under 37 CFR 1.97(e), and
  - a \$180.00 fee set forth in 37 CFR 1.17(p).  
(Filed after final action or notice of allowance, whichever occurs first, but before payment of the issue fee)

Applicant(s) submit herewith Form PTO/SB/08A-Information Disclosure Citation together with copies of patents, publications or other information of which applicant(s) are aware, which applicant(s) believe(s) may be material to the examination of this application and for which there may be a duty to disclose in accordance with 37 CFR 1.56.

The items listed on PTO/SB/08A are either in the English language or an English translation is provided, therefore, no further explanation is required.

Applicant submits that the above references taken alone or in combination neither anticipate nor render obvious the present invention. Consideration of the foregoing in relation to this application is respectfully requested.

It is requested that the information disclosed herein be made of record in this application

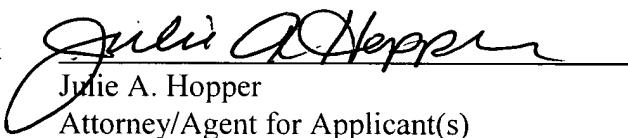
Respectfully submitted,

FITCH, EVEN, TABIN & FLANNERY

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date of Deposit: April 15, 2005

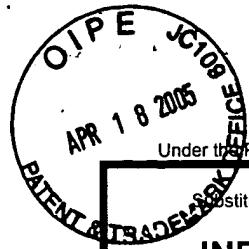
Typed Name: Julie A. Hopper

  
Julie A. Hopper  
Attorney/Agent for Applicant(s)  
Reg. No. 50869

Signature: 

Date: April 15, 2005

Telephone No.: 858-587-7649



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Institute for form 1449A/PTO

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

|       |   |    |   |                        |            |
|-------|---|----|---|------------------------|------------|
| Sheet | 1 | of | 1 | Attorney Docket Number | 81006/7400 |
|-------|---|----|---|------------------------|------------|

**Complete if Known**

|                      |                 |
|----------------------|-----------------|
| Application Number   | 10/735,016      |
| Filing Date          | 12/12/2003      |
| First Named Inventor | Koshinz, Dennis |
| Art Unit             | 2883            |
| Examiner Name        | Kianni          |

**U.S. PATENT DOCUMENTS**

| Examiner Initials* | Cite No. <sup>1</sup> | Document Number                            | Publication Date<br>MM-DD-YYYY | Name of Patentee or<br>Applicant of Cited Document | Pages, Columns, Lines, Where<br>Relevant Passages or Relevant<br>Figures Appear |
|--------------------|-----------------------|--|--------------------------------|--|---|
|                    |                       | Number - Kind Code <sup>2</sup> (if known) |                                |  |   |
|                    |                       | US-  |                                |  |   |

**FOREIGN PATENT DOCUMENTS**

| Examiner Initials* | Cite No. <sup>1</sup> | Foreign Patent Document   | Publication Date<br>MM-DD-YYYY | Name of Patentee or<br>Applicant of Cited Document | Pages, Columns, Lines,<br>Where Relevant Passages<br>or Relevant Figures Appear | T <sup>6</sup> |
|--------------------|-----------------------|---|--------------------------------|--|---|----------------|
|                    |                       | Country Code <sup>3</sup> - Number <sup>4</sup> - Kind Code <sup>5</sup> (if known) |                                |  |   |                |
|                    |                       |   |                                |  |   |                |
|                    |                       |   |                                |  |   |                |
|                    |                       |   |                                |  |   |                |
|                    |                       |   |                                |  |   |                |
|                    |                       |   |                                |  |   |                |

**NON-PATENT LITERATURE DOCUMENTS**

|                    |          |   |                |
|--------------------|----------|---|----------------|
| Examiner Initials* | Cite No. | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | T <sup>2</sup> |
|                    |          | FIBER OPTIONS, INC. "Learning About Options in Fiber". Chapter 2, pp 13-27.<br>http://www.fiberoptions.com/oldfiber/fiberoptions/tutorial.pdf. 1994.  |                |
|                    |          |   |                |
|                    |          |   |                |
|                    |          |   |                |
|                    |          |   |                |
|                    |          |   |                |

|                    |                 |
|--------------------|-----------------|
| Examiner Signature | Date Considered |
|--------------------|-----------------|

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup>Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup>For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup>Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup>Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.